

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000111666

**FILED**  
**Nov 17, 2010**  
**Secretary of State**

**Entity Name:** SPE UTILITY CONTRACTORS FD, L.L.C.

**Current Principal Place of Business:**

814 AIA NORTH  
200  
PONTE VEDRE BEACH, FL 32082 US

**New Principal Place of Business:**

24 PELICAN ST. WEST  
NAPLES, FL 34113 US

**Current Mailing Address:**

814 AIA NORTH  
200  
PONTE VEDRE BEACH, FL 32082 US

**New Mailing Address:**

24 PELICAN ST. WEST  
NAPLES, FL 34113 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

POSTILL, LAURA A  
24 PELICAN ST. W.  
NAPLES, FL 34113 US

**Name and Address of New Registered Agent:**

POSTILL, LORIE A  
24 PELICAN ST. W.  
NAPLES, FL 34113 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LORIE A. POSTILL

11/17/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: POSTILL, LORIE  
Address: 240 SE 10TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: MGRM  
Name: POSTILL, DAVID P  
Address: 240 SE 10TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LORIE A. POSTILL

CEO

11/17/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date